



**REPLY UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP ART UNIT 2835**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: GLENN

Application Serial No.: 10/601,509

Filing Date: June 23, 2003

For: SYSTEM TO VARY  
CAPACITANCE BASED ON A  
CONTROL SIGNAL

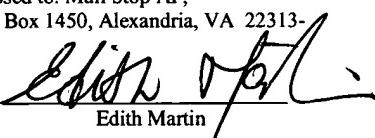
)  
Group Art Unit: 2835  
)  
Examiner: Michael, Rutland-Wallis  
)  
**RESPONSE TRANSMITTAL**  
)  
Attorney Docket No.: P15920  
)  
**PTO Customer Number 28062**  
) Buckley, Maschoff & Talwalkar LLC  
) Attorneys for Intel Corporation  
) Five Elm Street  
) New Canaan, CT 06840  
)  
)

**CERTIFICATE OF MAILING UNDER 37 CFR 1.8**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on May 4, 2006.

Dated: May 4, 2006

By:

  
Edith Martin

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing are:

1.  Fee as calculated and transmitted as described below
2.  After Final Amendment/Response to Final Office Action mailed March 20, 2006
3.  Terminal Disclaimer
4.  Additional Enclosures: Acknowledgement Postcard

FEE CALCULATION

For	Current	Prev. Paid	No. Extra	Rate	Fee
Total Claims	14	- 18	0	\$ 50.00	\$ 0.00
Indep. Claims	2	- 3	0	\$ 200.00	\$ 0.00
Multiple Dependent Claims (add \$300.00 if applicable)					\$ 0.00
<b>No Petition for Extension of Time is Required</b>					\$ 0.00
<b>OTHER FEE (specify purpose): Terminal Disclaimer</b>					\$130.00
					<b>TOTAL FEE</b> <b>\$130.00</b>

Credit Card Authorization Payment Form in the amount of **\$130.00** is enclosed.

The Commissioner is hereby authorized to charge and credit Deposit Account No. 50-1852 as described below. A duplicate copy of this sheet is enclosed.

- Credit any overpayment.
- Charge any additional fees required under 37 CFR 1.16 and 1.17.

Respectfully submitted,



May 4, 2006  
Date

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